

**CLAIMS ONLY**

Application Number

1011070498

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11	1					
12						
13						
14						
15						
16						
17						
18						
19						
20						
21	1					
22						
23						
24						
25						
26						
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42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	6					
Total Depend	25					
Total Claims	31					

*	Indep	Depend	*	Indep	Depend	*
61			61			
62			62			
63			63			
64			64			
65			65			
66			66			
67			67			
68			68			
69			69			
70			70			
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89			89			
90			90			
91			91			
92			92			
93			93			
94			94			
95			95			
96			96			
97			97			
98			98			
99			99			
100			100			
Total Indep						
Total Depend						
Total Claims						